



THE RUDDER

Sailings of the Medical Service Corps



From the MSC Director



Greetings Medical Service Corps officers! I want to first welcome and congratulate our newest Medical Service Corps officers selected through the In-service Procurement Program (IPP). This is a significant career milestone for all those selected, and one that continually shapes our Corps. I encourage all of you to congratulate and welcome them to the finest Corps in Navy Medicine!

Did you know that over 40% of our ranks have prior service? That is a robust number of "Mustangs" and it showcases the formidable experience we bring in

our support to the warfighter. IPP is one program for which enlisted members can apply to in order to become a commissioned officer, another is the Health Service Collegiate Program (HSCP). Every year there is a tremendous number of applications for a very limited number of opportunities. It is imperative that we identify, groom and ultimately select the best and brightest candidates. My charge to you is to help Sailors tell their story. Ensure their packages are reflecting their story and that the packages are correct. Remind candidates that tenacity goes a long way in our Corps.

Some of the best advice I've had comes from junior officers and enlisted men.

ADM Chester Nimitz

In closing, I have been making my rounds lately and have very much enjoyed fellowship with MSCs whom I have had the opportunity to meet with in Bahrain, Naples, Sigonella, Charleston, and Beaufort. Keep up the mentoring and fellowship in your local areas. I am consistently inspired by your commitment of service and your great achievements! Your efforts each and every day make an impact on those we are blessed to serve. Keep up the great work!

RDML Anne Swap

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From the Corps Chief's Office



The 70th Anniversary MSC Birthday Book is here!



Presale cost before 1 April is only \$47

For the year of establishment!

After 1 April the cost will be \$70

For the age of our Corps!

The MSC Birthday Book chronicles the Medical Service Corps' 70 year history and represents every subspecialty with photos and historical information. Don't miss this chance to capture our unique history!



Presale Form is available for ordering and payment details. For any questions or concerns please contact LT Jacqueline Evans at jacqueline.m.evans10.mil@mail.mil, 703-681-9392 or LT Tammy D'Alesandro at tammy.l.dalesandro2.mil@mail.mil, 703-681-8924.



Join the Medical Service Corps Facebook Group

Visit <https://www.facebook.com/groups/usnavymsc>

The Official
MSC
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App
Coming Soon

HEALTHCARE INFORMATION SYSTEMS ADMINISTRATION

Detailing

Our Story

Specialties

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News

Around the Globe

Resources

The Rudder

MSC Stakeholder

Navy.com

Reby Health

Fitness & Health Living

Suicide Prevention Lifeline

DoD Freedom of Information

From the Career Planner

Competence & Character (C & C)—How Do We Develop Both?

By CAPT Martin Kerr

The CNO, Admiral Richardson, recently released his Navy Leader Development Framework, with the intent to: “outline how the U.S. Navy will develop leaders that demonstrate both operational excellence and strong character at every level of seniority.”

I think we would all agree that competence at particular tasks, skills, etc., is developed over time. Of course we are born with varying degrees of intellect, aptitude, and together with other variables that may provide foundational abilities, or may make us more or less competent at certain things. And one could argue that certain genetic personality traits may provide the same foundational framework for people to have the “right” characteristics to succeed as a leader. The whole “leaders are born, not made” scenario. But we also know that there are so many other variables that get factored into the character equation, e.g., environmental factors, “upbringing,” etc.

So if our goal is to grow leaders who are technically competent and of outstanding moral character, how do we do it? First, I would recommend if you haven’t read the CNO’s framework guidance, please do so. In it, he breaks down his belief that we can develop both Character and Competence through a combination of formal schooling/classes, mentorship and self-guided study. I have placed it on the MSC Career Planner’s MILSUITE page for your review. I have also started a dialogue about C & C and I invite you to read the responses thus far.

Secondly, all of the respective Corps Career Planners are currently involved in a Leadership Development Working Group chaired by the CO of NMPDC, Captain Jeff Andrews. We are formulating leadership training roadmaps based on a gap analysis at certain career points. For example, “what courses/training opportunities should a LTJG be attending that will help develop him or her as a future CO/XO, Director, OIC or Specialty Leader?” Since the CNO believes that “competence and character are so tightly intertwined that they must be strengthened together,” we are including courses and training modalities that will develop leaders with an emphasis on both competence and character.

The resultant strategy, approved by our community lead, RADM McCormick-Boyle, “will lay out the strategy to develop leaders up to major command or its equivalent.”

I welcome your comments on the aforementioned MILSUITE page site upon your review of the article.

LEAPS 2017

On behalf of the Lewis E. Angelo Professional Symposium (LEAPS) Committee, we cordially invite you to attend the 2017 eLEAPS scheduled for Thursday, 20 April 2017 from 1200 - 1700 EST, our theme this year is "Thinking Out Loud". This year's live event will be held at the Defense Health Headquarters (Salon A) and simultaneously broadcast throughout the world via VTC as well as Facebook Live. Current confirmed speakers include: VADM Faison, RDML Swap, Dr. Malanoski, Naval Academy Head Football Coach Ken Niumatalolo, Dr. Ray Jorgensen (Executive Coaching and Meeting Facilitator), and LCDR(ret) Michael Knoell.

VTC participation requirements have been sent to all commands (for details or questions please contact LT Mabry at enkeleida.mabry.mil@mail.mil or (703) 681-5466). You must be a member of the LEAPS Facebook page to participate via Facebook Live, please sign up at <https://www.facebook.com/groups/NavyLEAPS/>. For additional information, please visit the LEAPS website at www.Navyleaps.com. You can also follow LEAPS Committee activities and information on Facebook (link noted above), Twitter and milSuite. We look forward to your participation in this enriching event!

Medical Service Corps Facebook Closed Group

If you would like to join, please go to <https://www.facebook.com/groups/usnavymsc>

Newsletter Submissions

Pictures, stories, and any other input can be submitted by forwarding to: usn.ncr.bumedfchva.lis@t.msc-corps-chiefs-office@mail.mil.

For pictures, please include location, rank, first and last name, subspecialty, and a short caption.

When making submissions, please ensure photos have been approved by your local Public Affairs Officer prior to submission.

Newsletter Editor

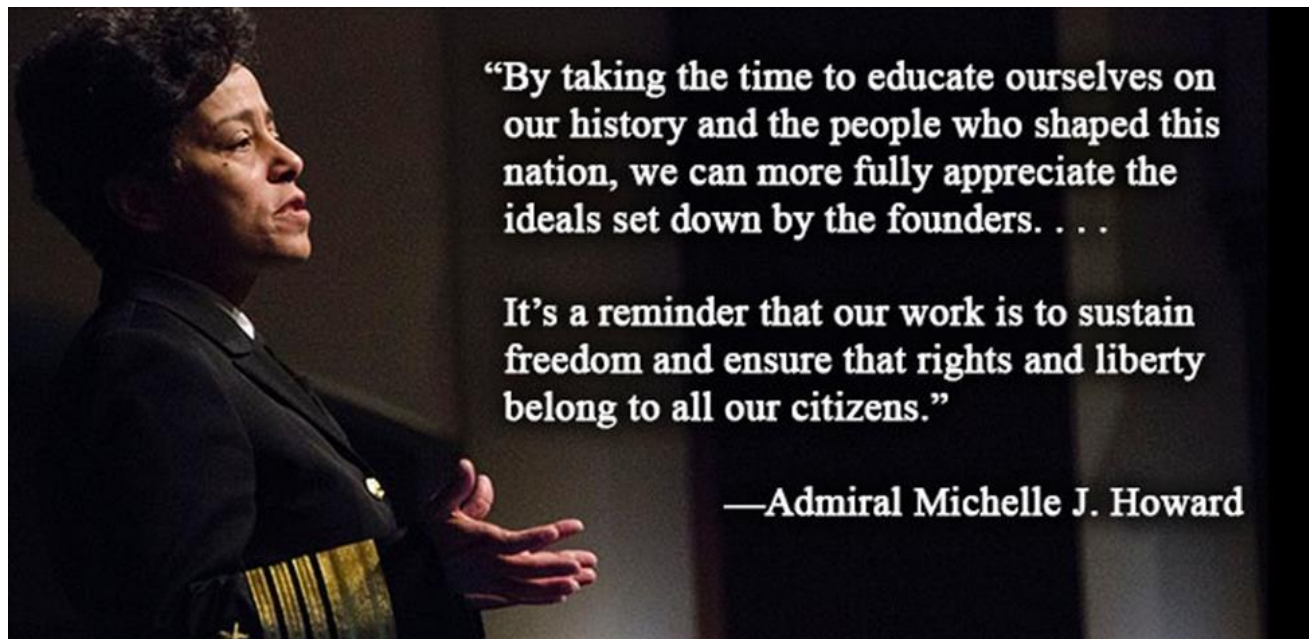
LCDR V. Deguzman
Newsletter Staff
 LCDR E. Polonsky
 LT L. Brown
 LT T. D'Alesandro



From the Corps Chief's Office

February is Black History Month

The African American Experience in the U.S. Navy



FORT LEAVENWORTH, Kan. (Nov. 13, 2015) Vice Chief of Naval Operations (VCNO) Adm. Michelle Howard speaks to students and faculty at the U.S. Army Command and General Staff College (CGSC). CGSC is a graduate school for United States Army and sister service officers, interagency representatives, and international military officers. Adm. Howard is the first female four-star in the history of the United States Navy. (U.S. Army photo by Stephen P. Kretsinger Sr./Released)

Today's African American Sailors stand proudly knowing the accomplishments of their predecessors, including the eight African American Sailors who earned the Medal of Honor during the Civil War, Dick Henry Turpin, one of the survivors of the explosion aboard the battleship *Maine* and the 14 African American female yeomen who enlisted during World War I. The Navy planted the seeds for racial integration during World War II and trained a generation of outstanding African American officer and enlisted personnel who provided critical leadership and expertise during the Cold War.

African Americans have a long heritage of service, first with state and continental navies, and then with the Department of the Navy since its establishment in 1798. They continue to distinguish themselves ashore, on ships, in aircraft, and on submarines through times of peace and conflict.

Share your photos, sea stories, and BZs to **THE RUDDER**

Submit them through your chain of command to: [MSC Corps Chief's Office](#)

From the Corps Chief's Office

Service on Ships, Submarines, and Ashore

African Americans have a long heritage of service, first with state and continental navies, and then with the Department of the Navy since its establishment in 1798. They continue to distinguish themselves ashore, on ships, in aircraft, and on submarines through times of peace and conflict.

The Centennial Seven

The Golden Thirteen

USS Mason

Port of Chicago Explosion



Ships Named in Honor of African Americans

USS Oscar Austin (DDG-79)

USNS Carl Brashear (T-AKE-7)

USS Jesse L. Brown (DE-1089)

USS George Washington Carver (SSBN-656)

USNS Charlton (T-AKR-314)

USS Rodney M. Davis (FFG-60)

USNS Charles Drew (T-AKE-10)

USNS Medgar Evers (T-AKE-13)

USS Gravely (DDG-107)

USS Harmon (DE-678)

USNS Henson (T-AGS-63)

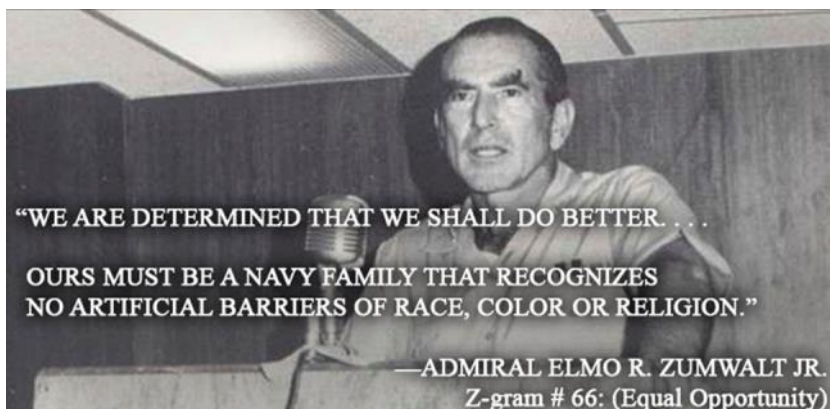
USS Miller (DE-1091)

USS Pinckney (DDG-91)

USNS Watson (T-AKR-310)

Trailblazers: Meeting the Challenge

During the 1960s and 1970s, blacks began commanding ships, submarines, and shore establishments. In 1974, the Navy issued its first Navy Equal Opportunity Manual and two years later issued its first Navy Affirmative Action Plan. And now, as in previous periods, black officers and enlisted personnel have continued to stand out among the Navy's best and brightest, gaining recognition in their roles as trailblazers:



Fleet Master Chief: **Master Chief April D. Beldo**

Master Diver: **Master Chief Boatswain's Mate Carl M. Brashear**

Naval Aviator: **Ensign Jesse Brown**

Naval Flag Officer: **Rear Admiral Samuel L. Gravely Jr.**

Commander, Allied Joint Force Command Naples; Commander, U.S. Naval Forces Europe; Commander, U.S. Naval Forces Africa: **Admiral Michelle J. Howard**

Navy Cross Recipient: **Cook Third Class Doris Miller**

WWII Chief: **Chief Gunner's Mate John Henry "Dick" Turpin**

First African American Female Officers: **Frances Eliza Wills and Harriet Ida Pickens**

From: Naval History and Heritage Command website, www.history.navy.mil

From the Corps Chief's Office

FY18 Active Duty Officer Promotion Board Information

Remaining FY18 Staff Promotion Selection Boards:

Active O-5 Staff commences 28 March 2017, Board 18265

Active O-4 Staff commences 16 May 2017, Board 18300

Reserve O-4 Staff commences 12 June 2017, Board 18340

Per [NAVADMIN 186/16](#), officer photographs will no longer be displayed during selection boards.

PERS-801 is the sponsor for all statutory officer promotion selection boards for ranks of O6 and below. PERS 803 sponsors two administrative boards: the Active Duty LDO/CWO Procurement Board and the Active Duty Redesignation Board. You will need to contact the appropriate sponsor (usually your detailee) for boards such as Command Screen, CO/XO, and Department Head.

The NDAA for 2006 changed the due date for letters to officer promotion boards. Please view [MILPERSMAN 1420-010](#), Communication with Officer Promotion Selection Boards, for more information.

Correspondence for **ALL** boards conducted at NPC in Millington is to be sent to the Customer Service Center. The address is provided within the annual notice of convening promotion selection boards (and below). Please use **ONLY** this address for any letter to a PROMOTION Board. Do **NOT** send your letter to your detailee or any other PERS code. If you do, you risk your correspondence getting lost or being received too late for the board. Also, you **MUST** include your **FULL** SSN on your correspondence.

Only eligible officers may communicate with a promotion selection board. Correspondence must arrive not later than the day before the convening date of the board and shall be addressed to:

Navy Personnel Command (NPC) Customer Service Center

President Active-Duty FY-18 (Grade) Staff Corps Promotion Selection Board, Board #XXX, (Board number is a required field)

5720 Integrity Drive, Millington, TN 38055-6300

If you choose to email a board package, you can send it to the CSCSELBOARD@navy.mil email address. To ensure more efficient processing and for internal tracking purposes, a recommended subject line of your email is "FOUO: Board Package: Active-Duty [Rank] [Staff] Board, FY-18XXX" (where XXX represents the actual 3-digit board number). [FY-18 Board Schedule](#). You **MUST** encrypt your email due to PII policy.

If you sent a letter to a board, you may check on its status by calling NPC Customer Service at (866) 827-5672 or using the web site: https://npccontactcenter.ahf.nmci.navy.mil/OA_HTML/npc.html. NPC Customer Service can assist in resetting passwords to the website.

For other questions concerning Active Duty Officer Promotion Boards, please call the NPC Customer Service Center (866) 827-5672 or Email: CSCSELBOARD@navy.mil. There is also some valuable information on the [General Board Information](#) pages.



From the Corps Chief's Office

eMentor Updates

Pharmacy is this Month's Community eMentoring Award Winner!

By LT Joshua Swift

The Navy Medical Service Corps (MSC) eMentor program is kicking off a Corps-wide campaign to increase awareness of the mentoring program and bolster mentor and mentee numbers. This program, which utilizes the MilSuite platform, is an opportunity for senior leaders to connect with junior officers and provide top-down mentorship for future MSC leaders! The strength of our Corps' future resides in our junior officers' (JO) development as well-rounded, forward thinking trailblazers.

Currently, there are 196 profiles created in the Navy MSC eMentor platform, a commendable 11% increase from January 2017! Leading the way is the Pharmacy subspecialty (1887/1888/1889) with 41 members, followed by Health Care Administrators (1800) with 31 members, and finally Aerospace and Operational Physiology (1836) with 21 members. In terms of rank, Lieutenants have 70 members, followed by Lieutenant Commanders with 59, and 35 Commanders. Nearly 70% of all eMentor profiles are from officers that are O-4 and below! The specialty with the greatest increase in eMentor members was also Pharmacy, which increased its membership by 14%! Although great strides are being made with this program, there are still less than 10% of all MSC officers who have created a profile and are utilizing the eMentor website on MilSuite.

Login or create your profile now on MilSuite if you have not already done so. Upon completing your profile, click on the milWiki button at the top of the screen and search "Navy Medical Service Corps eMentor." Once you reach the Navy MSC eMentor homepage, you can build your profile or watch the instructional video on how to create your eMentor profile for assistance. It only takes 10 minutes to create your individualized Mentor/Mentee profile. Bookmark this homepage for ease of access in the future by clicking the red bookmark button at the top of the screen.

If you have any questions about the program or how to create a profile, please contact LCDR Toler at ayessa.b.toler.mil@mail.mil. Additionally, Specialty Leaders are a great source for all pertinent information on the Navy MSC eMentor program.

<p>Education & Training Management Radiation Health Specialist Financial Management Environmental Health Physician Assistant Medical Technology Physical Therapy Microbiology Podiatry Pharmacy Physiology Medical Logistics Operations Analysis Patient Administration Plans, Operations & Medical Intelligence Health Facility Planning and Project Officer</p>		<p>Health Care Information Systems Biochemistry/Toxicology Occupational Therapy Manpower/Personnel Clinical Psychology Industrial Hygiene Entomology Audiology Dietetics Optometry Social Work Research Psychology Aerospace Physiology Health Care Administration Aerospace Experimental Psychology</p>
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From the Corps Chief's Office

Congratulations and Bravo Zulu to the following FY-18 Medical Service Corps In-Service Procurement Program selectees:

Health Care Administration

HM2 Adomako, Emmanuel Osei	HMCS Bryan, Shannette Cherie
HM1 Clover, Maryann Margaret	YN1 Dumas, Sherrie Maseria
HM1 Gallego, Sergio	HMC Greene, Robert Charles
HM1 Kanakis, Christine A	HM2 Mouton, Wesley Sherman
HMC Opoku, Cara Jane	HMC Opoku, Kwabena Darko
PS2 Quarles, Stencil Dominique	DC1 Ramirez, Judy
HM1 Scott, John Eric	MMN1 Thomas, Jesse Jac
HM1 Weaver, Michael Elliott	

Physician Assistant

HM1 Boswell, Jonathan Andrew	HM1 Brandes, Nicholas John
HM2 Conejo, Patrick	HM1 Falcetta, Vincent Michael
HMC Fuchs, Michael Joseph	HM2 Gilliland, Joshua Daniel
HM1 Gonzalez, Louis Albert	SO1 Nurre, Nathan Christopher
CS2 Offendel, Ofelia	HM1 Page, Andrew Harold
GYSGT Ramirez Jr, Edgardo	HM1 Saiz Jr, Roy
HM1 Thibault, Nicholas John	FC2 Thomas, Emily Jean
HM1 Waller, Christopher	

Pharmacy

HM1 Ahner, Michael Steven	HM2 Nketsiah, Frank
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Environmental Health

HM1 Miller, Jacob Thomas

Industrial Hygiene

PS1 Sandoval, Violeta

Radiation Health

MMNC Alcantar, Richard Villafurte MMC Bickett, Jacob

Occupational Therapy

HM2 Barone, Angelique Nicole	HM1 Jurado, Sophia Maria
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Social Work (MSW + Internship)

CTI2 Fibelkorn, Jessica Marie

Social Work (Internship)

CM2 Lennon, Ryan Michael

Reserve Update



San Diego, CA - Top picture: Current and incoming Navy Reserve Medicine Directors for Administration gather at Naval Medical Center San Diego for their annual training symposium, hosted by NR NMETLC. Front Row (L-R): CDR Louis Nunez, Medical Technologist and DFA - OHSU San Diego; CAPT Milan Moncilovich, Pharmacist and DFA - OHSU Portsmouth; CDR Elizabeth Dykstra, Healthcare Administrator and DFA - NR NAVCENT Medical; RDML Mark Bipes (IHO), Reserve Deputy Director - Medical Service Corps; CAPT Mike Medina, Entomologist and MSC Reserve Affairs Officer; CAPT(s) Eric Lubeck, Healthcare Administrator and DFA - OHSU Jacksonville; CAPT Patricia McCafferty, Dietician and DFA - EMF Bethesda; CDR Glenda Hughes, Healthcare Administrator and DFA - OHSU Bremerton. Back Row (L-R): CAPT Kenneth Wagner, Physician Assistant and DFA - OHSU Pensacola; CAPT Laura Musselman, Aerospace Physiologist/Healthcare Administrator and DFA - EMF Great Lakes; CAPT Marie Gannon, Optometrist and Program Manager for Leadership/Training - NR NMETLC; CAPT Martin Wadewitz, Healthcare Administrator and Action Officer for Leadership/Training - NR NMETLC; LT Bryce Mendez, Healthcare Administrator; CAPT Jennifer Reed, Physical Therapist and DFA - OHSU Camp Lejeune.

From the Detailers

Projected Rotation Date (PRD) Extension Information

For MSC Officers, PRD extension requests are submitted to PERS-4415:

- All requests should be emailed along with your Command's endorsement to the PERS-4415 email address: pers_4415_prds@navy.mil
- DO NOT include your Social Security Number (including last 4) in a PRD extension request.
- Please include a Command Point of Contact (POC). All PRD extension approvals or disapprovals from PERS-4415 will be sent to the requesting Officer and this Command POC via e-mail.

Please utilize the links below for more information. We have included a sample request letter template. Please do not hesitate to contact us if you have any questions.

MILPERSMAN 1301-104

<http://www.public.navy.mil/bupers-npc/reference/milpersman/1000/1300Assignment/Documents/1301-104.pdf>

PRD Extension Request Template:

[http://www.public.navy.mil/bupers-npc/officer/Detailing/r1staffcorps/medical/documents/prd extension request template.docx](http://www.public.navy.mil/bupers-npc/officer/Detailing/r1staffcorps/medical/documents/prd%20extension%20request%20template.docx)

WHEN WILL I GET MY ORDERS? Orders are released based on priority and availability of funding, which may be 3-6 months prior to detach. Retirement and Separation orders are typically released 6 months prior to detach.

Check your professional record online:

<http://www.public.navy.mil/bupers-npc/career/recordsmanagement/Pages/default.aspx>

Selection Boards:

<http://www.public.navy.mil/bupers-npc/boards/Pages/default.aspx>

MSC Detailers

CAPT Jody Dreyer (Senior MSC Detailer/HCC/Med Techs)
Jody.dreyer@navy.mil
(901) 874-3756

CDR Robert Anderson (HCA)
Robert.l.anderson@navy.mil
(901) 874-4120

LCDR Chuck Wilhite (HCS/PAs)
Charles.wilhite@navy.mil
(901) 874-4115



Specialty Spotlight: Pharmacy

Interesting fact: Of the 28 Hospital Corpsmen Medal of Honor recipients listed on Navy Bureau of Medicine and Surgery (BUMED) Medal of Honor Hall of Fame, seven recipients were Pharmacist's Mates. The Medical Service Corps (MSC) was established on 4 August 1947, and the four specialty sections created in the MSC were Supply and Administration, Optometry, Allied Sciences, and Pharmacy. Grown from the "plank owners" of the Medical Service Corps group that included just over 30 commissioned pharmacy officers, the Navy Pharmacy community now hovers at 130 officers strong. Including the enlisted pharmacy technician community and civilian technician/pharmacist workforce in the Navy, there are over 1,500 "pharmers" assigned worldwide, on seas and at land and wherever in support of Navy Medicine's mission.

Pharmacy officer presence is felt wherever the need exists to support Navy Medicine and the MSC community. In addition to the traditional billets at CONUS and OCONUS medical treatment facilities (MTFs) and in deployed environments (NATO Role 3 Multi-national Medical Unit in Kandahar, USNS Comfort and USNS Mercy), assigned pharmacist billets are present at the US Capitol, Medical Education and Training Campus (METC), Defense Logistics Agency (DLA), Defense Health Agency (DHA), and BUMED. Even at locations where there are no pharmacist billets assigned, pharmacists are available through the use of technology via telepharmacy service. At remote branch health clinics, pharmacy technicians, patients, and families have access to a pharmacist for real-time clinical consultation and medication counseling via "web-cam" interaction. Deployed in 2010 at over 100 sites worldwide, Navy Pharmacy is the largest utilizer of telepharmacy technology. Opportunities to contribute to the enterprise from pharmacy officers expand beyond the pharmacist-coded billets. Multiple pharmacy officers have served as Commanding Officer, Executive Officer, and Officer-In-Charge. We have pharmacy officers who are currently serving as the Senior MSC Detailer, Acting Deputy Assistant Deputy Chief of BUMED for IM/IT, Dean of Academic Affairs at METC, Team Leader for BUMED Defense Healthcare Management System Modernization (DHMSM) implementation, and BUMED Chief Innovation and Integration

Officer. On a national level, Navy Pharmacy is recognized by the two leading pharmacy professional associations as we are granted "seats" with voting privileges on professional issues and policy making structure in the House of Delegates within the American Pharmacists Association and the American Society of Health-System Pharmacists.

Mirroring the profession's expansion from the traditional distributive functions toward inter-disciplinary team-based care approach where the pharmacist's clinical/cognitive skills are utilized at the top of their education level, Navy pharmacists (both active duty members and civilian workforce) are key members of the healthcare team in Patient-Centered Medical Homeport, polypharmacy/pain management, and pharmacist-led ambulatory care clinics managing chronic conditions such as hypertension, hyperlipidemia, and anti-coagulation. Not limited to just clinical functions, the pharmacist's role has expanded to include information technology/management, pharmacoeconomics, and Pharmacy Benefit Management (PBM). Navy Pharmacy has one dedicated billet for a pharmacy informaticist who plays a key role in maintaining/managing the data, information, and knowledge assets across all systems that support patient safety and medication management. Likewise, we also have two pharmacist billets at the DLA's Troop Support Center whose daily operations directly contribute to the \$7B annual budget, and four billets at DHA where their PBM roles and responsibilities direct the sound execution \$8B annual pharmacy benefits provided to over 9M TRICARE beneficiaries across the globe.



"Pharmers" in the field - NATO Role 3 MMU (L-R) LCDR Baldomero Sagrado, HM2 Javier Flores, HM2 Jeremiah Kemp, CAPT Phil Blaine (CO), and HM1 Roberta Murguia.

Pharmacy Officers

Subspecialty Code = 1887-88

Billets = 85

End Strength = 97

Reserve Billets = 0



Specialty Spotlight: Pharmacy

While the path to commissioning as a Navy pharmacy officer could be diverse to include Direct Accession, the Health Services Collegiate Program (HSCP), or the MSC In-service Procurement Program (IPP), recently commissioned officers all have one thing in common – a Doctorate of Pharmacy (PharmD) degree. Although not required to practice as a clinician, many pharmacy officers complete a 1-year post-PharmD residency training program to expand their clinical skills. And quite a few have obtained board-certification on their own initiative; in fact, while the estimate from professional organizations is that approximately 5% of pharmacists nationwide are board-certified, 23% of currently commissioned Navy pharmacy officers are board certified! Many “life-long learning” pharmacy officers go on to obtain additional training (fellowship) and/or advanced degree (Masters, Doctor of Philosophy) in specialties such as Pharmacy Benefit Management (PBM), Healthcare Administration/Management, IM/IT, and Pharmacoeconomics, to round up their clinical experience and administrative skills to prepare for future roles in Executive Medicine.

Taking mentoring to heart, pharmacy officers are actively engaged in teaching and mentoring the future generation. Officers who were prior HSCP or MSC-IPP take officer candidates under their wing to provide tips/guidance/support while the candidates are still in pharmacy school. Seasoned officers enthusiastically volunteer to conduct career development boards with junior officers to “show them the ropes” and provide guidance on future career paths. Those with applicable experience volunteered to host/conduct a Talent Management webinar for the Navy “Phamily” worldwide to provide mentoring pearls on such topics as writing fitness reports and evaluations, preparing the strongest MSC-IPP packages possible, and optimizing War College opportunities. Through the work of the Navy Pharmacy Advisory Board, whose membership consists of Navy pharmacists and pharmacy technicians in both active duty and civilian workforce, Navy Pharmacy created our first-ever enterprise-wide standard operating procedure for implementation worldwide, incorporating best-practices from the medical treatment facility (MTF) and the profession to ensure consistent pharmacy practices at all of our MTF pharmacies.

On land and at sea, “pharmers” are there to provide patient care. Within or outside of the MTF setting, pharmacists step in/up to contribute to achieve the mission. Enlisted or officer, a “pharmer” will always take care of a shipmate. Navy Pharmacy: “Mission First – People Always”

“Where I Sit is Where I Stand”

By LCDR Bradley Gotto

Let me start by admitting that when I started my Navy career as a Health Services Collegiate Program (HSCP) Pharmacy Scholarship selectee back in 2002, I really had no clue what was in store for me as an officer in the Medical Service Corps. I still had little appreciation of what “MSC” meant even upon reporting to my first duty station, National Naval Medical Center (NNMC), in 2004. Since then I have truly come to appreciate our Corps. It is an amazing community of diverse clinicians, administrators, scientists...officers...leaders...PEOPLE. I have the privilege of working with some of the finest leaders our Nation has to offer; leaders I now call mentors, shipmates, and friends. I can say with conviction that being a member of the MSC Community has enriched my life, both professionally and personally, well beyond anything I could have ever expected.

As I mentioned, my career as a Navy Pharmacist began at NNMC in Bethesda, MD. I cut my teeth in outpatient pharmacy operations in what many consider to be one of the busiest and most demanding outpatient pharmacies in Military Medicine. NNMC was the Navy refill hub for the entire National Capital Region (NCR) and the pharmacy typically filled about 3,000 new and refill prescriptions daily. The majority of my time at NNMC was spent learning outpatient pharmacy operations, because my three year tour only lasted 15 months when I took hot fill orders to Atsugi Japan to fill a vacant one-of-one pharmacist billet.

The time I spent in Japan was both professionally enriching and personally rewarding. Atsugi was a small, tight-knit medical clinic, and I particularly enjoyed the opportunity to forge close professional relationships with the other health care staff. We were literally just down the hall from each other, so the communication and comradery was exceptional. It was in Atsugi where I really started to appreciate the myriad of possibilities that exist for an MSC Officer, outside of their trained specialty.

While there, I received exposure to Radiology and Lab processes and procedures, the development of the Clinic’s business plans, got a crash course in supply and cold chain management, and had the opportunity to work with regional DoD (including local Navy, Army, and Air Force bases) and host nation teams to develop collaborative Emergency Response plans during the H5N1 influenza outbreak of 2006. These experiences laid the foundation of my MSC experience, and I was hooked for life.

Continued to next page...

Join the Medical Service Corps Facebook Closed Group
Visit <https://www.facebook.com/groups/usnavymsc>

Specialty Spotlight: Pharmacy

Continued from previous page...

My shortened NNMC tour left me feeling like I had unfinished business there; I still had a strong desire to learn inpatient pharmacy. I knew that NNMC had amazingly experienced and talented inpatient pharmacists combined with very complex patients, which offered an excellent learning venue. Therefore, I received orders to NNMC where I was able to hone my clinical skills while assigned to the inpatient pharmacy division. My second tour at NNMC coincided with the closure of Walter Reed and integration with NNMC to create the Walter Reed National Military Medical Center (WRNMMC) Bethesda. This provided a very unique experience to work with fellow Navy, Army and Air Force officers across the NCR to streamline and integrate pharmacy practices across the Services and Region. Ultimately, this tour at Bethesda was also cut short when I was selected to attend the DUINS Directors Training (DT) Fellowship with Express Scripts Inc. (ESI), the largest Pharmacy Benefit Manager (PBM) in the U.S. ESI is the PBM for TRICARE and an extensive civilian book of business that includes Blue Cross and Blue Shield and a numerous other health insurance clients.

This was another truly unique opportunity that only a select few pharmacists get to experience. During my time at ESI, I got to rotate through various departments and got a first-hand look at how they administer the pharmacy benefit. I worked with their Office of Clinical Evaluation and Policy; the department that writes drug interaction software, outlines guidance for medication step therapy, develops prior authorization criteria, and manages PBM formularies. I had the opportunity to work with their research team on epidemiological studies of their client-patient network. Here I also gained extensive knowledge about how various health care models (Accountable Care Organizations vs. Fee for Service) work and the concepts that drive these business models. But, perhaps the most interesting aspect of my time there was that it coincided with some major corporate events that hit ESI; I was there during the Walgreens contract dispute and subsequent removal of over 8,000 pharmacies from the ESI TRICARE pharmacy network, and the merger with Merck-Medco PBM (another one of the largest PBMs in America). Let me just say that it was an eye-opening experience to see up-close how a large civilian company works its way through foundation-rattling corporate events. I left ESI with a full appreciation, perhaps even a little envy, at their ability to tackle and resolve issues with incredible speed and efficiency.

My DUINS utilization tour took me to sunny San Diego as the Regional Pharmacy Consultant at Navy Medicine West (NMW), where I was responsible for providing executive pharmacy guidance to 17 MTFs across the Region.

In this role, in addition to being a member of the Navy Pharmacy Advisory Board, I particularly enjoyed my front-row seat watching the talented Navy Medicine Teams across the Region as they improved care for our beneficiaries through a number of projects including: new hospitals at Camp Pendleton/Okinawa/Guam, the development and roll-out of the first BUMED Pharmacy SOP, and continued integration of Clinical Pharmacists into Primary Care, just to name a few. I also had ample opportunity to grow outside of my regional pharmacy responsibility as first-line reviewer of some of the National Committee for Quality Assurance (NCQA) accreditation packages from Medical Home Ports (MHP) across the Region (for those unfamiliar with NCQA just think Joint Commission for Primary Care). I gained exposure to the Medical Inspector General requirements for the Physical Readiness Program across the entire Region, served as Command Drug and Alcohol Prevention Advisor (DAPA), and served as Command Assessment Team Chair for two Command Defense Equal Opportunity Climate Surveys (DEOCS). Shortly after arriving at NMW the opportunity arose for me to serve on the core planning team for Pacific Partnership 2013, and I subsequently deployed aboard USS Pearl Harbor (LSD-52) where we visited Samoa, Tonga, and the Marshall Islands. This was another extremely rewarding duty station, and in fact, many pharmacists may consider this a dream job. I certainly relished my time there and consider it one of my career highlights. That's why it was bittersweet when I shortened my NMW tour to take orders up the street to Naval Medical Center San Diego (NMCS) in my current role as Department Head of Military Health Center and Deployment Health Center.

I just couldn't pass up the opportunity to step outside my traditional pharmacy training and learn more about the provision of Primary Care and Medical Readiness, and it has proven to be yet another enriching professional experience! I was fortunate to join a phenomenal team that quickly showed me the ropes and hooked me up to the fire hose of knowledge as I adjusted to running Med Home and Medical Readiness Clinics. I make it a point to stay engaged in the pharmacy community serving as Navy lead and representative to the Defense Health Agency (DHA) Drug Take-Back Task Force, engaged mentor to junior pharmacists and HSCP/IPP Pharmacy students, and staffing at the NMCS Pharmacy.

As a pharmacist who has been blessed with endless career opportunity, I believe the diversity of assignments and level of complexity in Navy Medicine, and the MSC Community in particular, is unmatched. Our community abounds in mentorship and tremendous role models to help you on your journey. As an MSC, the sky is the limit in what you can accomplish.

Emotional Intelligence: Pharmacy



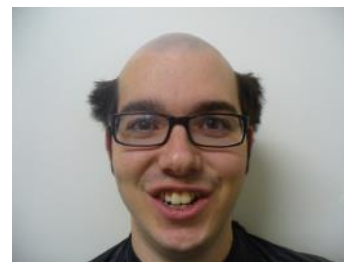
Emotional Intelligence (EI) is unlike other subjects we learn in school where you know that the right answer is in the back of the book; in real life no one has the key to the “right” emotions and emotional responses. Nonetheless, it is important to try to understand and improve our EI because it broadly encompasses abilities that characterize people who excel in life such as impulse control, persistence, zeal, empathy, and social deftness. If it is true that stressful situations can bring out one’s true self (for better or for worse!), then anyone who has worked in a pharmacy knows how our layer of social niceties can quickly erode away when handling difficult patients.



A real life example from the pharmacy community happened on a very busy (i.e. typical) pharmacy day, when a highly motivated technician attempted to cheer up a patient by commenting on her “80’s” hairstyle in her photo I.D. The patient did not take kindly to the comment, and during her next visit she walked up to the technician and asked him how he would feel if she made fun of his

glasses or baldness. The technician quickly became upset because while his comment was made with good intentions, at least in his mind, it was clear that the patient was trying to be spiteful. The situation quickly escalated to where a pharmacist had to intervene to avoid an imminent ‘PHARMAGEDDON’. Not only did the pharmacist have to apologize for the original offensive remark, but also for the technician’s display of anger.

There are five subscales that are commonly measured in EI theory, and in this case, one could argue that the technician in question would not have measured very highly in the “self-expression” and “interpersonal skills” categories. It is important to note that this technician interacts with dozens of patients on a daily basis, and routinely exhibits great customer service. So this example highlights



that true emotional intelligence persists throughout all kinds of situations. As military leaders, we should look beyond the counseling component of good order and discipline and recognize this as a teachable moment to help our staff improve their EI, and to ask for help in the workplace when interactions with staff or patients lead to poor emotional outcomes.

Teaching EI in schools has led to improved rapport between teachers and students, more leadership among students, and teachers with greater focus on students’ interests. If we make our staff aware of EI principles and teach them through both didactic and real life examples, then similar results in those schools could translate into an overall better and more productive work environment for all us. And, in the military, that means a team better prepared to accomplish the mission at hand.

Education & Training Management

Radiation Health Specialist

Financial Management

Environmental Health

Physician Assistant

Medical Technology

Physical Therapy

Microbiology

Podiatry

Pharmacy

Physiology

Medical Logistics

Operations Analysis

Patient Administration

Plans, Operations & Medical Intelligence

Health Facility Planning and Project Officer



Health Care Information Systems

Biochemistry/Toxicology

Occupational Therapy

Manpower/Personnel

Clinical Psychology

Industrial Hygiene

Entomology

Audiology

Dietetics

Optometry

Social Work

Research Psychology

Aerospace Physiology

Health Care Administration

Aerospace Experimental Psychology

MSCs in Focus

2017 Medical Service Corps Specialty Leader Symposium



Wearing her hat as the Medical Service Corps (MSC) Director, Rear Admiral Anne M. Swap, who is also the Commander, Navy Medicine East (NME), hosted the annual Medical Service Corps (MSC) Specialty Leader Symposium 31 January to 2 February 2017 in Portsmouth, VA.

The focus of the symposium, which brought together approximately 60 MSC officers from around the globe, was on the important role MSC officers have in supporting the Navy Surgeon General's goals of health, readiness, and partnerships. Topics discussed during the three-day training symposium ranged from compliance to value-based care.

The Navy's MSC is comprised of over 2,700 Naval officers; encompassing 31 diverse specialties that include physician assistants, physical therapists, pharmacists, psychologists; aerospace physiologists and health care executive leadership--the career path taken by RDML Swap.

During her closing remarks, RDML Swap stressed the important role of the MSC leaders, thanking them for their dedication and support.

"It takes a village to run the Medical Service Corps," she said as she encouraged attendees to reach out to her in the future for any guidance they might need.

MSC officers continue to invest in capabilities that are uniquely inherent to the Navy and Marine Corps team by serving in a variety of settings; such as expeditionary medical operations in support of our war fighters to humanitarian assistance and disaster response missions, reaching as far as Africa to Southeast Asia.

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Biochemistry/Toxicology
Occupational Therapy
Manpower/Personnel
Clinical Psychology
Industrial Hygiene
Entomology
Audiology
Dietetics
Optometry
Social Work
Research Psychology
Aerospace Physiology
Health Care Administration
Aerospace Experimental Psychology

MSCs in Focus



Portsmouth, VA - RDML Swap addresses MSC Specialty Leaders during the 2017 Specialty Leader Symposium.



Portsmouth, VA – Pictured (L-R): LCDR Melissa Harnly, Medical Logistics; CAPT Steve Jeffs, POMI, and RDML Anne Swap pose for a photo during the 2017 Specialty Leader Symposium.

Naval Branch Health Clinic Fallon Partners with the Veteran's Affairs in Reno

Naval Branch Health Clinic Fallon, located in Fallon Nevada and the Reno Veterans Affairs in Reno Nevada, have entered into a resource sharing agreement that will allow hospital corpsmen to work at the VA in Reno to increase and maintain clinical proficiency. A hospital corpsman is an enlisted medical specialist in the United States Navy that works in a wide variety of capacities and locations to include at naval hospitals and clinics, on ships, and with doctors and nurses as the primary medical caregivers for Sailors while underway at sea. Hospital corpsmen are frequently the only medical care-givers available in many fleet or Marine units on extended deployments. While on deployment, regardless of the environment, service members rely on our Corpsmen to have broad clinical skills that may not be used in their normal workplace back home, especially within the trauma and inpatient settings. They perform duties as assistants in the prevention and treatment of disease and injury and assist health care professionals in providing medical care to Sailors and their fami-

lies all over the world. The selected hospital corpsmen will work with other healthcare professionals at the VA Sierra Nevada Health System in the Emergency Department, the Medical Surgical Inpatient Unit, and the Community Living Center to maximize educational opportunities in an inpatient setting. "This is an excellent initiative for our staff to both give back to the community, our Veterans, as well to enhance their skillsets in preparation for down-range assignments", said Lieutenant Commander Janiese Cleckley, Officer-In-Charge at the Naval Branch Health Clinic. LCDR Cleckley was speaking from experience as she was a hospital corpsman prior to her commissioning as a naval officer. Naval Branch Health Clinic Fallon is an outpatient medical facility and a Branch Clinic of Naval Hospital Lemoore located in Lemoore, California. The hospital corpsmen reported for their rotation on 13 February 2017. Leaders from both organizations are very excited to be able to work collaboratively to serve our Veterans.



Fallon, NV - Pictured (L-R): ADPCS/NE Chuck Benninger, HN Alexander Franco, HA Koran Gatson, LCDR Janiese Cleckley, OIC, Director Lisa Howard, HM1 Charlcie Roman, HMC Randall Manning, RN Sue O'Day, Associate Director Jack Smith.

MSCs in Focus



Pensacola, FL—LT Christopher Greil receives his Wings of Gold as Naval Aerospace/Operational Physiologist (NAOP) #345 on 3 February 2017 at the Naval Aviation Museum. Pictured: Captain Dan Patterson, OIC of Naval Survival Training Institute (NSTI); Commander Meredith Yeager, AOIC NSTI, CDR Rob Higgins, Director of Aviation Survival Training Center (ASTC) Pensacola, LT Christopher Greil, CDR Tyler Scheeler, Assistant Specialty Leader NAOP; LT Joshua Muffett, NAOP Intern ASTC Pensacola; and, LT Leah Bradley, Student NAOP.



Anaheim, CA – LCDR Cody Schaal, Industrial Hygiene Officer, and LT Amanda Boudreaux, Audiologist, attend the 2017 Joint Defense Veterans Audiology Conference. LCDR Schaal presented research on the effects of ototoxic substances on hearing loss and LT Boudreaux presented a collaborative case study of patient-centered audiological care.



Lemoore, CA - LT Sarah Galka, Clinical Social Worker, receives a Command Coin from RDML Paul D. Pearigen, Commander Navy Medicine West, and Chief, Navy Medical Corps, for her outstanding service as Substance Abuse Rehabilitation Program Licensed Independent Practitioner, Morale Recreation and Welfare President and Sexual Assault Prevention Response Coordinator. LT Galka raised more than \$20 thousand for MWR and spearheaded 13 fundraising events. Photo taken by HM1 Rose Webber.

MSCs in Focus



Pensacola, FL - Current and former Aerospace Experimental Psychologists gather at the National Museum of Naval Aviation, NAS Pensacola, to honor CDR(ret) Robert S. Kennedy (fourth from right), recipient of the U.S. Naval Aerospace Experimental Psychology Society's Pioneer in Aviation Psychology Award. Over his 22-year career, Dr. Kennedy's research on the effects of motion sickness and stress on aviator performance fundamentally contributed to paradigm-shifting developments in aviation selection and training.

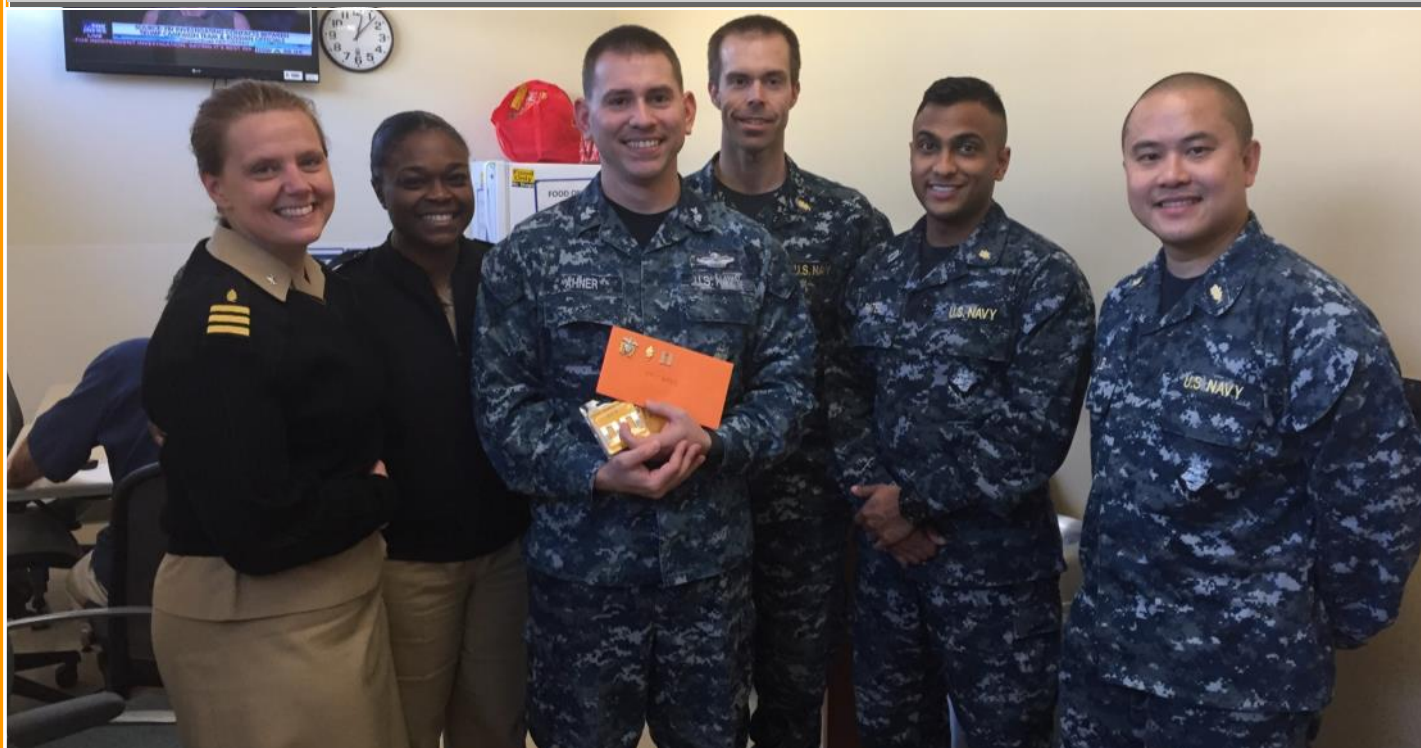


Pensacola, FL - Advanced Aerospace Medicine for International Medical Officers (AAMIMO) students pose with their guide, LCDR Tatana Olson, Aerospace Experimental Psychologist, during a tour of Naval Aerospace Medical Institute. AAMIMO is a 23-week course emphasizing military aerospace medicine, enabling students to address clinical aerospace, hyperbaric global preventative medicine problems, perform the aeromedical and human factors aspects of aircraft mishap investigations and prevention, and assume higher levels of responsibility in their aerospace medicine careers.

MSCs in Focus



USNS BRUNSWICK - Pictured (L-R): CDR Tara Smith, Clinical Psychologist at OPNAV N171, CAPT Sheri Parker, Director, Systems Capability (BUMED -M92) and LCDR Coleman Chandler, Deputy Branch Head, OPNAV N81 pose for a photo onboard the USNS BRUNSWICK during the maiden voyage to transit the Panama Canal.



Camp Pendleton, CA - HM1 Michael Ahner is congratulated on his selection for the Medical Service Corps In-service Procurement Program for Pharmacy. Picture left to right: CDR Traci Hindman (Director for Clinical Support Services), CDR Rona Green (Director for Administration), HM1 Michael Ahner (Pharmacy Technician), LT Terence Cusack (Pharmacist), LT Chirag Patel (Pharmacist), and LCDR Brenden Le (Pharmacist).

MSCs in Focus



Jacksonville, FL - Top picture: LT Colleen Freeman, Physical Therapist at Naval Branch Health Clinic (NBHC) Kings Bay, conducts a shoulder strengthening exercise on Chief Culinary Specialist Royce Cobb. Left - CDR Michael Sunman, Optometrist at Naval Branch Health Clinic (NBHC) Kings Bay, conducts an eye examination on Master-at-arms Seaman Madison Hinde.

Get engaged on



to get the latest updates on the MSC!

MSCs in Focus



San Diego, CA - Top picture: CAPT Rita Simmons, Commanding Officer of the Naval Health Research Center, presents LCDR Brennan Cox, Aerospace Experimental Psychologist, with the 2016 Naval Medical Research and Development Enterprise Junior Officer of the Year Award.

Honduras - Left picture: CDR Jennifer Wallinger, Dietitian from NH Jacksonville, FL, meets with children at a Honduran school before conducting nutrition and oral hygiene classes. CDR Wallinger is currently serving in support of the Continuing Promise 2017 mission.

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 Biochemistry/Toxicology
 Occupational Therapy
 Manpower/Personnel
 Clinical Psychology
 Industrial Hygiene
 Entomology
 Audiology
 Dietetics
 Optometry
 Social Work
 Research Psychology
 Aerospace Physiology
 Health Care Administration
 Aerospace Experimental Psychology

U.S. Navy Medical Service Corps

**Medical Service Corps
Director,
RDML Anne M. Swap, MSC, USN**

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The Medical Service Corps supports Navy Medicine's readiness and health benefits mission. It is the most diverse Officer Corps in Navy Medicine with 31 specialties organized under three major categories: Healthcare Administrators, Healthcare Clinicians, and Healthcare Scientists. There are over 3,000 active and reserve MSC officers that serve at Medical Treatment Facilities, on ships, with the Fleet Marine Force, with Seabee and special warfare units, in research centers and laboratories, in a myriad of staff positions with the Navy and Marine Corps, and with our sister services around the world.

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Many Specialties - One Corps!

